Form C

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

Permit Application

Division of Water

NAME OF FACILITY:	AGENCY USE ONLY
PERMIT NO.:	COUNTY:

I. OUTFALL LOCATION

❑ For each outfall, list the latitude and longitude of its location to five decimal points.

OUTFALL NUMBER	LATITUDE In Decimal Degrees	LONGITUDE In Decimal Degrees	RECEIVING WATER (name)

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and stormwater runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NUMBER	SOURCES OF WASTEWATER			TREATMENT DESCRIPTION (from Table C-1)
	Operations Contributing to Flow	Avg. Flow (include units)	Design Flow (include units)	

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (Continued)

C. Except for stormwater runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

❑ Yes. If yes then complete the following table.

❑ No. If no then go to Section III.

OUTFALL NUMBER	**OPERATIONS CONTRIBUTING TO FLOW**	**DAYS PER WEEK** (specify avg.)	**MONTHS PER YEAR** (specify avg.)	**FLOW RATE** (MGD)		**TOTAL VOLUME** (include units)		**DURATION** (days)
				Long-Term Avg.	Max Daily	Long-Term Avg.	Max Daily	

III. PRODUCTION

A. Does an effluent limitation guideline promulgated by EPA under Section 304 of the Clean Water Act apply to your facility? (40 CFR 401 – 471)

❑ Yes. Complete Item III-B and list the effluent limitation guideline category(ies):

❑ No. Go to Section IV.

B. Are the limitations in the applicable effluent limitations guideline expressed in terms of production or other measures of operation? (40 CFR 401 – 471)

❑ Yes. Complete Item III-C.

❑ No. Go to Section IV.

C. If you answered "Yes" to Item III-B, list the quantity which represents the actual measurement of your level of production, expressed in the terms and units used in the applicable effluent limitation guideline, and indicate the affected outfalls

AVERAGE DAILY PRODUCTION			**Affected Outfalls (list outfall numbers)**
Quantity Per Day	**Units of Measure**	**Operation, Product, Material, Etc. (specify)**	

IV. IMPROVEMENTS

A. Are you now required by any federal, state or local authority to meet any implementation schedule for the construction, upgrading, or operation of wastewater equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders and grant or loan conditions

❑ Yes. Complete the following table.

❑ No. Go to Item IV-B.

IDENTIFICATION OF CONDITION AGREEMENT, ETC.	AFFECTED OUTFALLS		BRIEF DESCRIPTION OF PROJECT	FINAL COMPLIANCE DATE	
	No.	Source of Discharge		Required	Projected

B. **OPTIONAL**: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction

V. INTAKE AND EFFLUENT CHARACTERISTICS

A. Tables A, B, and C of this section are included on separate sheets numbered 5-18.

B See instructions before proceeding.

Complete one set of tables for each outfall.

C Place the outfall number in the space provided on each table.

D. Use the space below to list any of the pollutants (refer to SARA Title III, Section 313) listed in TABLE C-3 of the instructions which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession

POLLUTANT	SOURCE	POLLUTANT	SOURCE

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. Is any pollutant listed in Table C of this section a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

❑ Yes. List all such pollutants in the space provided below.

❑ No. Go to Item VII.

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

❑ Yes. Identify the test(s) and describe their purposes below.

❑ No. Go to Section VIII.

VIII. CONTRACT ANALYSIS INFORMATION

Applicants that discharge pollutants to waters of the Commonwealth must provide analytical data for the parameters shown on this Form. The analysis must be performed by a laboratory that is certified in accordance with 401 KAR 5:320

All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods. In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136.

Below please list any analyses reported in Section V that were performed by a contract laboratory or consulting firm.

NAME	ADDRESS	TELEPHONE	POLLUTANTS ANALYZED

IX. CERTIFICATION.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

PRINTED NAME AND TITLE:	
SIGNATURE:	DATE:
TELEPHONE NO.	EMAIL:

Return completed application form and attachments to:
Division of Water
Surface Water Permits Branch
300 Sower Boulevard, 3rd Floor
Frankfort, KY 40601

Direct questions to: Surface Water Permits Branch at (502) 564-3410.

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued from Section V. INTAKE AND EFFLUENT CHARACTERISTICS)

PART A. PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY OF TABLE A.
See instructions before proceeding.
Complete one set of tables for each outfall. Place the outfall number in the space provided on each table.
You must provide the results of at least one analysis for every pollutant in this table.

TABLE A Page 1 of 1 **OUTFALL NO.**

1. POLLUTANT	2. EFFLUENT							3. UNITS (specify if blank)		4. INTAKE (optional)		
	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No of Analyses
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
1. Biochemical Oxygen Demand $(BOD)_5$												
2. Chemical Oxygen Demand (COD)												
3. Total Organic Carbon (TOC)												
4. Total Suspended Solids (TSS)												
5. Ammonia (as N)												
6. Flow (MGD)	VALUE		VALUE		VALUE			MGD		VALUE		
7. Temperature (winter)	VALUE		VALUE		VALUE			°c		VALUE		
8. Temperature (summer)	VALUE		VALUE		VALUE			°c		VALUE		
9. pH	MINIMUM	MAXIMUM	MINIMUM	MAXIMUM				STANDARD UNITS				

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued)

PART B.

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY OF TABLE B.
See instructions before proceeding.
Complete one set of tables for each outfall. Place the outfall number in the space provided on each table.

In coumn "2. MARK X", place an "X" in either the **Believed Present** column (2.a) for each pollutant you know or have reason to believe is present; or place an "X" in the **Believed Absent** column (2.b) for each pollutant you believe to be absent.
If you mark the **Believed Present** column for any pollutant, you must provide the results of at least one analysis for that pollutant.
Complete one table for each outfall. See the instructions for additional details and requirements.

TABLE B. Page 1 of 2 — **OUTFALL NO.**

1. POLLUTANT and CAS NO. (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
1.. Bromide (24959-67-9)														
2. Chloride														
3. Chlorine, Total Residual														
4. Color														
5. E.coli														
6. Fluoride (16984-48-8)														
7. Hardness ($CaCO_3$)														
8. Nitrate – Nitrite (as N)														
9. Nitrogen, Total Organic (as N)														
10. Oil and Grease														
11. Phosphorous (as P), Total (7723-14-0)														
12. Radioactivity														
(1) Alpha, Total														
(2) Beta, Total														
(3) Radium, Total														

TABLE B. Page 2 of 2	OUTFALL NO.													
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
(4) Radium, 226, Total														
(5) Strontium-90, Total														
(6) Uranium														
13. Sulfate (as SO_4) (14808-79-8)														
14. Sulfide (as S)														
15. Sulfite (as SO_4) (14286-46-3)														
16. Surfactants														
17 Aluminum, Total (7429-90)														
18. Barium, Total (7440-39-3)														
19. Boron, Total (7440-42-8)														
20. Cobalt, Total (7440-48-4)														
21. Iron, Total (7439-89-6)														
22. Magnesium, Total (7439-96-4)														
23. Molybdenum, Total (7439-98-7)														
24. Manganese, Total (7439-96-6)														
25. Tin, Total (7440-31-5)														
26. Titanium, Total (7440-32-6)														

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued)

PART C.

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY OF TABLE C.
See instructions before proceeding.
Complete one set of tables for each outfall. Place the outfall number in the space provided on each table.

If you are a primary industry and this outfall contains process wastewater, refer to the instructions (Table C-2) to determine which of the GC/MS fractions you must test for.
Mark "X" in the **Testing Required** column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols.
If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark "X" in the **Believed Present** column for each pollutant you know or have reason to believe is present.
Mark "X: in the **Believed Absent** column for each pollutant you believe to be absent.
If you mark either the **Testing Required** or **Believed Present** columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are eight pages to this part; please review each carefully. Complete one table (all eight pages) for each outfall.
See the instructions for additional details and requirements

TABLE C. Page 1 of 8 — **OUTFALL NO.**

1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
METALS, CYANIDE AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)															
2M. Arsenic, Total (7440-38-2)															
3M. Beryllium, Total (7440-41-7)															
4M. Cadmium, Total (7440-43-9)															
5M. Chromium, Total (7440-43-9)															
6M. Copper, Total (7550-50-8)															
7M. Lead, Total (7439-92-1)															
8M. Mercury, Total (7439-97-6)															
9M. Nickel, Total (7440-02-0)															
10M. Selenium, Total (7782-49-2)															
11M. Silver, Total (7440-28-0)															

TABLE C. Page 2 of 8	OUTFALL NO.															
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
METALS, CYANIDE AND TOTAL PHENOLS continued															
12M Thallium, Total (7440-28-0)															
13M. Zinc, Total (7440-66-6)															
14M. Cyanide, Total (57-12-5)															
15M. Phenols, Total															
DIOXIN															
2,3,7,8 Tetra-chlorodibenzo-P-Dioxin (1784-01-6)				DESCRIBE RESULTS:											
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)															
2V. Acrylonitrile (107-13-1)															
3V. Benzene (71-43-2)															
4V. Bis (Chloromethyl) Ether (542-88-1)															
5V. Bromoform (75-25-2)															
6V. Carbon Tetrachloride (56-23-5)															
7V. Chlorobenzene (108-90-7)															
8V. Chlorodi-bromomethane (124-48-1)															
9V. Chloroethane (74-00-3)															
10V. 2-Chloro-ethylvinyl Ether (110-75-8)															
11V. Chloroform (67-66-3)															

TABLE C. Page 3 of 8	OUTFALL NO.														
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – VOLATILE COMPOUNDS continued															
12V. Dichloro-bromomethane (75-71-8)															
13V. Dichloro-difluoromethane (75-71-8)															
14V. 1,1-Dichloroethane (75-34-3)															
15V. 1,2-Dichloroethane (107-06-2)															
16V. 1,1-Dichlorethylene (75-35-4)															
17V. 1,2-Dichloropropane (78-87-5)															
18V. 1,3-Dichloropropylene (452-75-6)															
19V. Ethylbenzene (100-41-4)															
20V. Methyl Bromide (74-83-9)															
21V. Methyl Chloride (74-87-3)															
22V. Methylene Chloride (75-00-2)															
23V. 1,1,2,2-Tetrachloroethane (79-34-5)															
24V. Tetra-chloroethylene (127-18-4)															
25V. Toluene (108-88-3)															
26V. 1,2-Trans-Dichloroethylene (156-60-5)															
27V. 1,1,1-Trichloroethane (71-55-6)															

TABLE C. Page 4 of 8	OUTFALL NO.														
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – VOLATILE COMPOUNDS continued															
28V. 1,1,2-Trichloroethane (79-00-5)															
29V. Tri-chloroethylene (79-01-6)															
30V. Trichloro-fluoromethane (75-69-4)															
31V. Vinyl Chloride (75-01-4)															
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)															
2A. 2,4-Dichlorophenol (120-83-2)															
3A. 2,4-Dimethylphenol (105-67-9)															
4A. 4,6-Dinitro-O-Cresol (534-52-1)															
5A. 2,4-Dinitro-phenol (51-28-5)															
6A. 2-Nitrophenol (88-75-5)															
7A. 4-Nitrophenol (100-02-7)															
8A. P-Chloro-M-Cresol (59-50-7)															
9A. Pentachloro-phenol (87-88-5)															
10A. Phenol (108-05-2)															
11A. 2,4,6-Trichloro-phenol (88-06-2)															

TABLE C. Page 5 of 8	OUTFALL NO.														
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)															
2B. Acenaphtylene (208-96-8)															
3B. Anthracene (120-12-7)															
4B. Benzidine (92-87-5)															
5B . Benzo (a) Anthracene (56-55-3)															
6B. Benzo (a) Pyrene (50-32-8)															
7B. 3,4-Benzo-fluoranthene (205-99-2)															
8B. .Benzo (ghi) perylene (191-24-2)															
9B. .Benzo (k)-fluoranthene (207-08-9)															
10B. Bis (2-chloroethoxy) Methane (111-91-1)															
11B. Bis (2-chloroethel) Ether (111-44-4)															
12B. Bis (2-chloroisopropyl)-Ether (102-80-1)															
13B. Bis (2-ethyl-hexyl) Phthalate (117-81-7)															
14B. 4-Bromophenyl Phenyl Ether (101-55-3)															
15B. Butyl Benzyl Phthalate (85-68-7)															
16B. 2-Chloro-Naphthalene (7005-72-3)															
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)															

TABLE C. Page 6 of 8	OUTFALL NO.														
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS continued															
18B. Chrysene (218-01-9)															
19B. Dibenzo (a,h) Anthracene (53-70-3)															
20B. 1,2-Dichloro-benzene (95-50-1)															
21B. 1,3-Dichloro-Benzene (541-73-1)															
22B. 1,4-Dichloro-benzene (106-46-7)															
23B. 3,3-Dichloro-benzidene (91-94-1)															
24B. Diethyl Phthalate (84-66-2)															
25B. Dimethyl Phthalate (131-11-3)															
26B. Di-N-Butyl Phthalate (84-74-2)															
27B. 2,4-Dinitro-toluene (121-14-2)															
28B. 2,6-Dinitro-toluene (606-20-2)															
29B. Di-N-Octyl Phthalate (117-84-0)															
30B. 1,2-Diphenyl-hydrazine (as Azo-benzene) (122-66-7)															
31B. Fluoranthene (208-44-0)															
32B. Fluorene (86-73-7)															
33B. Hexachloro-benzene (118-71-1)															
34B. Hexachloro-butadiene (87-68-3)															
35B. Hexachloro-cyclopentadiene (77-47-4)															

TABLE C. Page 7 of 8	OUTFALL NO.														
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS continued															
36B. Hexachloro-ethane (67-72-1)															
37B. Indeno (1,2,3-cd) Pyrene (193-39-5)															
38B. Isophorone (78-59-1)															
39B. Napthalene (91-20-3)															
40B. Nitrobenzene (98-95-3)															
41B. N-Nitro-sodimethylamine (62-75-9)															
42B. N-Nitrosodi-N-Propylamine (621-64-7)															
43B. N-Nitro-sodiphenylamine (86-30-6)															
44B. Phenanthrene (85-01-8)															
45B. Pyrene (129-00-0)															
46B. 1,2,4-Trichloro-benzene (120-82-1)															
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)															
2P. α-BHC (319-84-6)															
3P. β-BHC (319-85-7)															
4P. γ-BHC (58-89-9)															
5P. δ-BHC (319-86-8)															
6P. Chlordane (57-74-9)															

TABLE C. Page 8 of 8	OUTFALL NO.														
1. POLLUTANT and CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Avg. Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – PESTICIDES continued															
7P. 4,4'-DDT (50-29-3)															
8P. 4,4'-DDE (72-55-9)															
9P. 4,4'-DDD (72-54-8)															
10P. Dieldrin (60-57-1)															
11P. α-Endosulfan (115-29-7)															
12P. β-Endosulfan (115-29-7)															
13P. Endosulfan Sulfate (1031-07-8)															
14P. Endrin (72-20-8)															
15P. Endrin Aldehyde (7421-93-4)															
16P Heptachlor (76-44-8)															
17P. Heptaclor Epoxide (1024-57-3)															
18P. PCB-1242 (53469-21-9)															
19P. PCB-1254 (11097-69-1)															
20P. PCB-1221 (11104-28-2)															
21P. PCB-1232 (11141-16-5)															
22P. PCB-1248 (12672-29-6)															
23P. PCB-1260 (11096-82-5)															
24P. PCB-1016 (12674-11-2)															
25P. Toxaphene (8001-35-2)															